

STATEMENT OF ORGANIZATION

OFFICE USE ONLY 1 / 3

1. Name and Address of Committee

TBI PAC - ISSUES
P.O. Box 416

Mansura LA 71350

Check if new committee ____

2. Date of this Statement
10/02/2013

3. Estimated Membership
0

4. Amended Statement?
☒ Yes ☐ No

*Amendment
S/O
10/4*

13000248

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

Position	Name	Address
Chairperson		
Treasurer		

Please see attached sheets.

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administrators or financially supports this committee.)

Name	Address	Relationship to Committee

Please see attached sheets.

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions)

Name	Address

Please see attached sheets.

8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:

a. Check one: ☐ Principal Campaign Committee ☐ Subsidiary Committee

b. Name of Candidate

c. Office Sought by the Candidate

Please see attached sheets.

9. Name of Person Preparing Report

Daytime Telephone

Please see attached sheets.

10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

Dated 10/02/2013

David Rivas Jr
Signature of Committee Chairperson

318 253-9767
Daytime Telephone Number

Douglas C Burke
Signature of Committee Treasurer, if any

318 253-9767
Daytime Telephone Number

AMENDMENT

STATEMENT OF ORGANIZATION

OFFICE USE ONLY 1/13

1. Name and Address of Committee

TBI PAC - ISSUES
P.O. Box 416

Mansura LA 71350

2. Date of this Statement

01/07/2013

3. Estimated Membership

0

4. Amended Statement?

Yes ☒ No

Check if new committee ☐

PAC
S/O
1/10

Rec # 9927
#1054



13000248

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

Position Name Address

Chairperson

Treasurer

SCANNED

JAN 22 2013

By: *[Signature]* Please see attached sheets.

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administrators or financially supports this committee.)

Name Address Relationship to Committee

Please see attached sheets.

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b. Name of Candidate

c. Office Sought by the Candidate

Please see attached sheets.

9. Name of Person Preparing Report

Daytime Telephone

Please see attached sheets.

10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

Dated 01/07/2013.

Earl J Barbry Sr
Signature of Committee Chairperson

Earl J Barbry Sr.

318 253-9767
Daytime Telephone Number

Douglas C Burke
Signature of Committee Treasurer, if any

Douglas C. Burke

318 253-9767
Daytime Telephone Number

Affiliated Persons / Organizations

3 / 3

Name and Address of Treasurer

Douglas C Burke
151 Melacon Drive

Marksville

LA 71351

Chairperson:

Candidate Information

Office Sought (Include title of office as well as parish, city, town and/or election district)

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Daytime Telephone (Preparer):

Rel of Aff. Org. to Comm:

Name and Address of Chair Person

David Rivas, Jr
151 Melacon Drive

Marksville

LA 71351

Chairperson:

Candidate Information

Office Sought (Include title of office as well as parish, city, town and/or election district)

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Daytime Telephone (Preparer):

Rel of Aff. Org. to Comm: Asst Secretary/Campaign Treasurer

Name and Address of Financial Institution

The Cottonport Bank
144 South Main

Marksville

LA 71351

Chairperson:

Candidate Information

Office Sought (Include title of office as well as parish, city, town and/or election district)

Name of Political Party:

☐ SUPPORTED ☐ OPPOSED by the Committee

Daytime Telephone (Preparer):

Rel of Aff. Org. to Comm:

AMENDMENT

Affiliated Persons / Organizations

3 / 3

Name and Address of Chair Person Chairman Earl J Barbry Sr 151 Melacon Drive Marksville LA 71351 Chairperson:	Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Treasurer Douglas C Burke 151 Melacon Drive Marksville LA 71351 Chairperson:	Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Deputy Treasurer David Rivas, Jr 151 Melacon Drive Marksville LA 71351 Chairperson:	Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm: Asst Secretary/Campaign Treasurer
Name and Address of Financial Institution The Cottonport Bank 144 South Main Marksville LA 71351 Chairperson:	Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm: